

Secretary of State Statement of Information

(California Stock, Agricultural Cooperative and Foreign Corporations)

IMPORTANT — Read instructions before completing this form.

Fees (Filing plus Disclosure) - \$25.00;

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SI-550

Copy Fees – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

 Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)

BENX AMERICA INC.

FILED

Secretary of State State of California

MAY 0 7 2019

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2. 7-Digit Secretary of State File Number

C4230666

3. Business Addresses

a. Street Address of Principal Executive Office - Do not list a P.O. Box 400 CONTINENTAL BLVD. 6TH FL	City (no abbreviations) EL SEGUNDO	State CA	Zip Code 90245
b. Mailing Address of Corporation, If different than item 3a	City (no abbreviations)	State	Zip Code
c, Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box	City (no abbreviations)	State CA	Zip Code

4. Officers

The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/ WOO SEOK	First Name	Middle Name	Last Name SEO			Suffix
Address 400 CONTINENTAL BL	VD. 6TH FL		City (no abbreviations) EL SEGUNDO	State CA	Zip Code 90245	
b. Secretary WOO SEOK	First Name	Middle Name	Last Name SEO			
Address 400 CONTINENTAL BL	_VD. 6TH FL		City (no abbreviations) EL SEGUNDO	State CA	Zip Code 90245	* without make min on r, weld have now you
c. Chief Financial Officer/ WOO SEOK	First Name	Middle Name	Last Name SEO			Suffix
Address 400 CONTINENTAL BL	.VD. 6TH FL		City (no abbreviations) EL SEGUNDO	State CA	Zip Code 90245	

5. Director(s)

California Stock and Agricultural Cooperative Corporations ONLY: Item 5a: At least one name <u>and</u> address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions).

a. First Name WOO SEOK	Middle Name	Last Name SEO			Suffix
Address 400 CONTINENTAL BLVD. 6TH FL		City (no abbreviations) EL SEGUNDO	State CA	Zip Code 90245	
b. Number of Vacancies on the Board of Directors, if any					

6. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL - Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) WOO SEOK	Middle Name	Last Name SEO			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 400 CONTINENTAL BLVD. 6TH FL	City (no abbreviations) EL SEGUNDO		State CA	Zip Code 90245	

CORPORATION - Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 6a or 6b

7. Type of Business

Describe the type of business or services of the Corporation E-COMMERCE OF GENERAL MERCHANDISE

8. The Information contained herein, including in any attachments, is true and correct.

Type or Print Name of Person Completing the Form

05/03/2019

Date

WOO SEOK SEO

CEO

州宁丛

Signature